

| Rec'd | OREA USE ONLY | Type Remit |
|---------|---------------|------------|
| App Rev | State Reg | |
| Lic Iss | Fed Reg | ☐ MO |
| Ct Iss | Late Pen Lic | ☐ PO |
| | Late Pen Ct | |

UPGRADE APPLICATION

Read All Directions on the Reverse Side Prior to Completing This Application

| <u>PART A</u> | | | | | | | | | | |
|---------------|--------------------|---|-----------------|----------------------------|--|---|-----------------------|-------------------------|--------------------------|---|
| 1 | . Cı | urrent License Level | | | | | | | | |
| | Pro | ovisional License | | Trainee I | License | | | Residential License | Cert | tified Residential |
| 2 | 2. Le | evel of Upgraded Applica | ion | | | | | | | |
| | Tra | ainee License | | Resident | ial Licens | se | | Certified Residential | Cert | tified General |
| _ | | urrent License Number | | | 1 | T | D. | | | |
| L | acense | e Number | | | | Expiration | n Date | | | |
| 4 | l. Na | ame as it Appears on Lice | nse | | | | | | | |
| I | Last | | | | | | First | | Mid | dle |
| | | usiness Name and Address of Business | s of | Record | | t list a P.O | | ural Route or Star Rout | re) | Check if Change |
| (| City | | | | County | | | State | Zip | Code |
| ϵ | 5. M | ailing Address | | | | | | | | Check if Change |
| N | Number | r, Street and Suite Number | | | | | | | | |
| (| City | | | | County | | | State | Zip | Code |
| 7 | . Ph | nysical Home Address | | (Do <u>not</u> | list a P.C | D. Box, Ru | ıral Rout | te or Star Route) | | Check if Change |
| N | Number | r, Street and Suite Number | | | | | | | | |
| (| City | | | | County | | | State | Zip | Code |
| | | | | | | | | | | |
| () | <u>8. Bı</u> | usiness Telephone Numbe | <u>r</u> | | | , | me Tele | phone Number | | |
| | | | | | | | <u> </u> | | | |
| servation. I | I under ecution | schments is true and correct an erstand that providing false inform and punishment by imprisonn | matio ent in | n is grour n state pris | nswered on design of the desig | each questi enial or revo 3 or 4 year | on fully a ocation of | any license and may sub | t any purp ject me to | pose of evasion or menta disciplinary action and/o |
| xecuted this | | day of | | | at _ | | | | | (city or |
| ounty) | | | | | | (sta | te). | | | |
| | | | | | | Signat | ure | | | |
| | | | | | | Name | (please pı | rint) | | |
| MU | JST BI | E SIGNED BEFORE AND CE | RTIFI | ED BY A | NOTAR | Y PUBLIC | IF EXEC | CUTED OUTSIDE THE S | TATE OF | CALIFORNIA |
| | | Comments: | | FO | R ORF | EA USE | ONLY | | | |

Lic Renewed

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Date

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F/L

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CE Complete

Address Change

Orig Sig

PART B-APPLICANT BACKGROUND INFORMATION

INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY WRITING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH.
- FAILURE TO ANSWER ALL QUESTIONS OR FAILURE TO ANSWER ANY QUESTION TRUTHFULLY MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION.

| 1. | Have you ever used or been known by any name other than, or in addition to, the name listed on the reverse side of this application? I yes, list all such other names. |
|----|---|
| | Applicant's answer |
| 2. | Have you resided outside the State of California at any time during the past 5 years? If yes, list all addresses at which you resided outside of California during this period. |
| | Applicant's answer |
| 3. | Have you ever been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of conviction. For purposes of this question, a minor traffic offense is one for which the maximum fine which could have been imposed is \$100 or less. To expedite review of your application, please attach a copy of the police report and a certified copy of the court docket, complaint and judgement showing the final disposition (sentence) of the case. NOTE: Termination of probation and dismissal of the matter pursuant to Penal Code Section 1203.4 does not relieve you of the requirement to disclose any conviction when applying for a license issued by the Office of Real Estate Appraisers. |
| | Applicant's answer |
| 4. | Are you now or have you ever been placed on probation or parole on terms which restricted or limited your contact or dealings with any financial or real estate related activity or business or otherwise restricted your acting in a fiduciary capacity? To expedite review of your application, please attach a certified copy of the court records, including the complaint, complete docket, judgement and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records. |
| | Applicant's answer |
| 5. | Have you ever been prohibited from participating in the affairs of any insured depository institution pursuant to Section 19(a) of the Federal Deposit Insurance Act? |
| | Applicant's answer |
| 6. | Do you presently have criminal charges pending before any court of law? If so, please specify the court in which the matter is pending the case number and charges and submit a copy of the police report, and a certified copy of the complaint and docket. |
| | Applicants's answer |
| 7. | Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency. |
| | Applicant's answer |
| 8. | Have you ever been disciplined or had a penalty imposed by any governmental agency, including OREA, with respect to your activities as a licensee of that agency? Attach a copy of the police report(s) and/or investigating agency records. |

Applicant's answer _

READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

- Do not write in the shaded areas.
- Type or print clearly in blue or black ink.
- Photocopies of completed forms are <u>not</u> acceptable.
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order or government purchase order.
- Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.
- Out-of-state addresses require a completed and notarized *Consent to Service of Process* (REA 3006).
- Sign and date this form prior to submittal.
- If you have any questions, please write to the address listed below or call (916) 263-0722.
- Mail completed applications, fees and required documents to:

OFFICE OF REAL ESTATE APPRAISERS 1755 Creekside Oaks Drive, Suite 190 Sacramento, CA 95833 FEES

Upgrade to Certified Levels

Application Review

\$150

NOTE: Upgrades from either the Trainee License or Residential License to the Certified levels are required to pay examination fees directly to the test center at the time of examination. In addition, a \$75 Issuance fee and \$10 Child Support Review Fee must be submitted after successfully passing the examination.

Upgrade to Residential License

| Application Review | \$ 150 |
|-----------------------------------|----------------|
| Federal Registry (per year) | \$ 25* |
| Federal Registry State Processing | \$ 25 |
| Child Support Review Fee | <u>\$ _ 10</u> |
| Total | \$ 220 |

* The Federal Registry fee for Trainee License holders upgrading to a Residential License is \$25 per year or part therof for the remaining term of the Trainee License, plus a \$25 state processing fee.

INSTRUCTIONS-PART A

- 1. CURRENT LICENSE LEVEL--The level of the license your currently hold.
- **2. LEVEL OF UPGRADE APPLICATION--**Mark the level for which you wish to upgrade your application.
- **3. CURRENT LICENSE NUMBER--**The license number and expiration date of your current license.
- **4. NAME AS IT APPEARS ON LICENSE--**Your name as it appears on your current license.
- **5. BUSINESS NAME AND ADDRESS OF RECORD--**The name of your business or your employer name. The business address of record is mandatory information. Do <u>not</u> list a P.O. Box Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: The information provided is public record. If this is a change of address, mark the appropriate box.

- **6. MAILING ADDRESS OF RECORD--**Your mailing address. If this is a change of address, mark the appropriate box. Information provided is public record.
- **7. PHYSICAL HOME ADDRESS--**The physical location of your home address. Do <u>not</u> list a P.O. Box Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e.., the nearest intersection and distance from it).
- **8. BUSINESS TELEPHONE NUMBER--**Your business telephone number. Information provided is public record.
- **9. HOME TELEPHONE NUMBER--**Your home telephone number.